

## Application for Apprenticeship

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ Email Address \_\_\_\_\_

Cell Phone Number \_\_\_\_\_ Other Phone \_\_\_\_\_

College/University \_\_\_\_\_ Major \_\_\_\_\_ Graduation Year \_\_\_\_\_

Why would you like to apply for an apprenticeship with the Florida District?

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Would you like to be an apprentice in a particular church? What role/roles would you like to help with in the ministry of the church?

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What do you hope to gain from this experience?

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What sort of employment are you seeking, outside of the church, to have during this apprenticeship?

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Are you hoping to stay in Florida for long-term employment?  Yes  No  
If so, in what location?

**Please include two letters of recommendation.  
One from a professor and one from your pastor (home church or college church).**